

Brewer Public Library Volunteer Application

Date: _____

Personal Information

Name: _____ Date of Birth: _____
Social Security # _____ Driver's License #: _____ State: _____
Other Names (Alias, maiden, etc.): _____
Home Address: _____ Telephone: _____
Previous Address: _____
Previous Address: _____

All addresses from previous 10 years are required; complete on back if necessary.

Work History

Present Employer: _____ Work Phone: _____
Address: _____ Years of employment: _____
Skills (clerical, library experience, etc.): _____
Volunteer experience: _____

How did you hear about this opportunity? _____

Why do you wish to volunteer at the Brewer Public Library? _____

References:

Name: _____	Address: _____	Phone: _____
Name: _____	Address: _____	Phone: _____
Name: _____	Address: _____	Phone: _____

Consent/Release Form:

I, _____, authorize and give consent for the City of Brewer Library and Police Department, to obtain information regarding myself. This includes, but is not limited to:

Employment Records/References	Criminal Background Records/Information
Criminal Background Check	Driver's License Check
Coaching Experience	First-Aid Experiences
Personal References	Addresses

I authorize this information to be obtained either in writing or via telephone in connection with my volunteer application.

Name (Printed): _____ Date: _____

Signature: _____

Please attach a photocopy of a valid driver's license or state ID.